U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U - 8038

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2, Fiscal Year Covered From:

	1 / 1 / 2004 Through: 12 / 31 / 2004			
3. Name and address of person filing.	Name, file number, and address of labor organization.			
Name Mark Holliday	Name IUOB Local 701			
	Labor Organization File Number 023-992			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 555 E First Street	Street 555 East First Street			
City Gladstone	City GTadstone			
State Oregon ZIP Code + 4 97027-2501	State Oregon ZIP Code + 4 97027-2501			
5. Position in labor organization. Business Manager				
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):				
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.	derived income or other economic benefit of on represents or is actively seeking to represent.			
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name				
Trade Name, if any:				

## Signature

7.b. Amount.

15. Signature and verification. The undersigned declares, under persubmitted in this report (including the information contained in any accundersigned's knowledge and belief, true, correct, and complete. (See page 2)	companying documents), has been exar	nined by the signatory and is, to the best of the
Signed Mark Holliday	On <u>8-(2-05</u>	(503) 650-7701 Telephone Number

City

P.O. Box, Bldg., Room No., if any

Name of Person Filing Mark Holliday	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any).  Name General Pension Plan  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 1125 17th Street, NW  City Washington  State District of Columbia ZIP Code + 4 20036	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer			
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name General Pension Plan  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 1125 17th Street, NW  City Washington  State District of Columbia ZIP Code + 4 20036	11.a. Nature of such dealing.  Mark Holliday is a General Pension Plan Trustee required to attend General Pension Plan Board Meeting.  11.b. Approximate dollar value of such dealing.  12.a. Nature of interest held or income received.  January 2004: The General Pension Plan reimbursed general pension plan trustee expenses to attend board meeting in Florida.			
	12.b. Amount. \$1,874			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			

Name of Person Filing Mark Holliday	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value <b>from a business</b> (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any).  Name Putnam Investments  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street Investor Way  City Norwood  State Massachusetts ZIP Code + 4 02062	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer			
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name   Welfare and Pension Administration Services    Trade Name, if any:   PO Box 34203    Street	11.a. Nature of such dealing.  The Union's Trust (defined benefit plan) has funds invested with Putnam. Also, Putnam is an investment option for our members when investing their defined contribution pension fund contributions.			
	11.b. Approximate dollar value of such dealing. \$70,000,000			
City Seattle	12.a. Nature of interest held or income received.			
State Washington ZIP Code + 4 98124	January 2004: Putnam purchased lunch and golf in Florida during General Pension Plan meeting.			
	12.b. Amount. \$129			
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.			
(including trade name, if any).				
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City				
State ZIP Code + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			

Name of Person Filing Mark Holliday	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any).  Name Washington Capital Management Inc.  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 1000 SW Broadway, Suite 950  City Portland  State Oregon ZIP Code +4 97205	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer			
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name Welfare and Pension Administration Services  Trade Name, if any:  P.O. Box, Bldg., Room No., if any PO Box 34203	11.a. Nature of such dealing.  The Union's Trust (defined benefit pension plan) has funds invested with Washington Capital.			
City Seattle State Washington ZIP Code + 4 98124	11.b. Approximate dollar value of such dealing. \$24,000,000  12.a. Nature of interest held or income received.  February 2004: Washington Capital purchased lunch at Stanfords resturant.			
C. Received from any employer (other than an employer covered unde	12.b. Amount. \$27			
or from any labor relations consultant to an employer any payment of money				
<ol> <li>Name and address of Employer or Labor Relations Consultant (including trade name, if any).</li> </ol>	14.a. Nature of payment.			
Name Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City				
State ZIP Code + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			

Name of Person Filing Mark Holliday		File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any).  Name Putnam Investments  Trade Name, if any:	9. Business deals with:  a. Labor Organiza	tion		
P.O. Box, Bldg., Room No., if any  Street Investor Way  City Norwood  State Massachusetts ZIP Code + 4 02062	b. Trust  c. Employer			
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name Welfare and Pension Administration Services  Trade Name, if any:	invested with Putn option for our mem	ng. (defined benefit plan) has funds am. Also, Putnam is an investment bers when investing their defined on fund contributions.		
P.O. Box, Bldg., Room No., if any PO Box 34203	11.b. Approximate dollar valu	ue of such dealing. \$70,000,000		
City Seattle  State Washington ZIP Code + 4 98124	12.a. Nature of interest held July 2004: Putnam Bandon Dunes in Or	purchased lunch and golf at		
	12.b. Amount.	\$131)		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
State ZIP Code + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			

Name of Person Filing Mark Holliday		File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any).  Name General Pension Plan  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 1125 17th Street; NW  Cly Washington  State District of Columbia ZIP Code + 4 20036	9. Business deals with:  a. Labor Organiza  b. Trust  c. Employer	tion		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deali	ng.		
Name General Pension Plan  Trade Name, if any:  P.O. Box, Bldg., Room No., if any		General Pension Plan Trustee General Pension Plan Board		
Street 1125 17th Street, NW	11.b. Approximate dollar valu	e of such dealing.		
City Washington  State District of Columbia ZIP Code + 4 20036		General Pension Plan reimbursed an trustee expenses to attend		
	12.b. Amount.	\$793		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
<ol> <li>Name and address of Employer or Labor Relations Consultant (including trade name, if any).</li> </ol>	14.a. Nature of payment.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City State ZIP Code + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			

Name of Person Filing Mark Holliday	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any).	9. Business deals with:			
Name Washington Capital Management Inc.  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	a. Labor Organization  b. Trust			
Street 1000 SW Broadway, Suite 950	c. Employer			
City Portland  State Oregon ZIP Code + 4 97205				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.			
Name Welfare and Pension Administration Services	The Union's Trust (defined benef funds invested with Washington (			
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any PO Box 34203				
Street	11.b. Approximate dollar value of such dealing.	\$24,000,000		
City Seattle	12.a. Nature of interest held or income receive			
State Washington ZIP Code + 4 98124	August 2004: Washington Capita golf at Crosswater Country Club	l purchased lunch and		
	12.b. Amount.	\$1.75		
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above)	\$1.75 kg/k 2-2 mg/k-roth sujuk-roth sujuk-mak-maki didakat mj tita-kustask-rotus		
or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant	r parts A and B above)	\$1.75 kg/k/2/ample-routh-rapid-routh-amplitude-facilities from the Australia routh		
or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.	\$1.75		
or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	r parts A and B above) or other thing of value.	\$1.75		
or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name	r parts A and B above) or other thing of value.	\$1.75		
or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:	r parts A and B above) or other thing of value.	\$1.75		
or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any	r parts A and B above) or other thing of value.	\$1.75		
or from any labor relations consultant to an employer any payment of money  13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street	r parts A and B above) or other thing of value.	\$1.75		

Name of Person Filing Mark Holliday		File Number U-	
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or otherwork of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or ind dealing with your labor organization or with a trust in which your labor organization.	vise dealing with the business rely seeking to represent, or irectly to, or otherwise		
8. Name and address of Business (including trade name, if any).  Name Washington Capital Management Inc.  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street 1000 SW Broadway, Suite 950  City Portland  State Oregon ZIP Code + 4 97205  10. If 9.b. or 9.c. is checked give trust or employer's name.  Name Welfare and Pension Administration Services		ng. (defined benefit pla	n)) has funds
Trade Name, if any:  P.O. Box, Bldg., Room No., if any  PO Box 34203  Street  City Seattle  State Washington  ZIP Code +4 98124	invested with Wash:  11.b. Approximate dollar valu  12.a. Nature of interest held  September 2004: Wall  and lunch at Deser	e of such dealing.  I or income received.  ashington (Capital pu	\$24,000,000
C. Paradius different annual survey (ethers there are employer envised under	12.b. Amount.	Andrea Andrea	\$76
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	or other thing of value.		
<ol> <li>Name and address of Employer or Labor Relations Consultant (including trade name, if any).</li> </ol>	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		

Name of Person Filing Mark Holliday	of Person Filing Mark Holliday			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any).  Name Welfare and Pension Administration Services.  Trade Name, if any:  P.O. Box, Bldg., Room No., if any PO Box 34203  Street  City Seattle  State Washington ZIP Code + 4 98124	9. Business deals with:  a. Labor Organiza  b. Trust  c. Employer	tion		
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name Welfare and Pension Administration Services  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City Seattle  State Washington  ZIP Code + 4 98124	11.a. Nature of such deali This is the Union'  11.b. Approximate dollar valu  12.a. Nature of interest hele October 2004: The trustees to attend Foundation benefit	s Trust itself.  De of such dealing.  d or income received.  Trust prepaid for the 2005 annual	International	
	12.b. Amount.		\$994	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	14.a. Nature of payment.			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			

Name of Person Filing Mark Holliday	f Person Filing Mark Holliday			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any).  Name Killian Asset Management  Trade Name, if any:  P.O. Box, Bldg., Room No., if any Suite 600  Street 1250 W. Northwest Highway  City Palatine  State Illinois ZIP Code +4 60067	9. Business deals with:  a. Labor Organiza  b. Trust  c. Employer	tion		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deali	ng.		
Name General Pension Plan  Trade Name, if any: P.O. Box, Bldg., Room No., if any	The International with Killian Asset	Union's Trust has funds invested Management.		
Street 1125 17th Street, NW	11.b. Approximate dollar valu	ue of such dealing. \$80,000,000		
City Washington, D.C.  State District of Columbia ZIP Code + 4 20036	12.a. Nature of interest held December 2004: Ki Mark Holliday at t	llian sent a holiday cookie box to		
	12.b. Amount.	\$35		
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City State ZIP Code + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			